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on September 6, 2005
Date

Brenda C. McFadden

Signature

Brenda C. McFadden

Typed or printed name of person signing Certificate

Registration Number, if applicable

(713) 228-8600
Telephone Number

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Fee Transmittal (1 page)
Request for Continued Examination Transmittal (1 page)
Information Disclosure Statement (2 pages)
IDS (Citation) by Applicant (1 Reference) (15 pages)
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	09/913,819-Conf. #4515
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	November 2, 2001
		First Named Inventor	Rene Bongers
		Examiner Name	B. Q. Tieu
		Art Unit	2642
TOTAL AMOUNT OF PAYMENT	(\$) 790.00	Attorney Docket No.	09669/006001

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account			Deposit Account Number: <u>50-0591</u>	Deposit Account Name:	Osha · Liang LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments			

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
<u>Fee Description</u>							
Each claim over 20 (including Reissues) <u>50</u> <u>25</u>							
Each independent claim over 3 (including Reissues) <u>200</u> <u>100</u>							
Multiple dependent claims <u>360</u> <u>180</u>							
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
<u>24</u>	<u>- 27 =</u>	<u>x</u> <u>=</u>	<u>_____</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>_____</u>	
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	
<u>2</u>	<u>- 3 =</u>	<u>x</u> <u>=</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
<u>_____</u>	<u>- 100 =</u>	<u>/50</u> <u>(round up to a whole number)</u>	<u>x</u> <u>=</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): <u>1801 Request for continued examination (RCE) (see 37 ...</u> <u>790.00</u>							

SUBMITTED BY	
Signature	<u>Robert P. Lord</u>
Name (Print/Type)	Robert P. Lord
Registration No. (Attorney/Agent)	46,479
Telephone	(713) 228-8600
Date	September 6, 2005

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Dated: September 6, 2005

Signature: Brenda C. McFadden (Brenda C. McFadden)